

P04000120911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

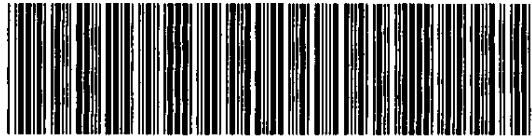
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 MAR 12 PM 1:21

FILED

Roberts MAR 15 2010

INTEGRATED CONSTRUCTION SOLUTIONS, INC.

8120 SW 191 STREET, MIAMI, FLORIDA. 33157
PHONE 305-484-5706 FAX 786-242-4110

Amendment Section
Division of Corporations
P.O.Box 6327
Tallahassee, FL. 32314

March 08 2010

Re: Dissolution of Integrated Construction Solutions, Inc.
Document # PO4000120191

Enclosed Articles of Dissolution and \$35.00 fee for filing.

Please return all correspondence concerning this matter to the undersigned at the above address.

For other contact on this matter please call Roger Drummond 305-484-5706.

Yours Sincerely.

A handwritten signature in black ink, appearing to read 'R. Drummond', with a long horizontal flourish extending to the right.

Roger S Drummond
President.

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

INTEGRATED CONSTRUCTION SOLUTIONS, INC.

SECOND: The document number of the corporation (if known): PO4000120911

THIRD: The date dissolution was authorized: DECEMBER 10 2009

Effective date of dissolution if applicable: DECEMBER 31 2009
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - If in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

ROGER S. DRUMMOND

(Typed or printed name of person signing)

PRESIDENT.

(Title of person signing)

Filing Fee: \$35

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CLERK OF STATE
TALLAHASSEE, FLORIDA